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Introduction

Family can be taken to mean a unit consisting of husband and wife, and their children, (Moses and Adewale 2002). Moses, Patric and Olarenwaju (2001) quoting Otite and Ogion (1981) reported that family as a bio-social group, meaning that family has both biological and social aspects. Moses and Adewale (2002) quoting Murdock (1965) defines family as a social group characterized by common residence, economic, cooperation, and reproduction. They reported that family is a group of persons united by ties of marriage, blood, or adoption constituting a single household; interacting and communicating with each other in their respective social role of husband and wife, mother and father, brother and sister, as well as maintaining a common culture. Moses, Patrick, and Olarenwaju (2001) classified family into extended and nuclear family based on the kinship system; this system is based on blood relation and marriage. Based on Lifecycle family, they also grouped family into family of orientation and family of procreation. While on the basis of modernization, they further grouped family into traditional family, modern family, and post-modern family. It is basically a microcosm of larger society, so any tension in family creates tension in the society at large.

The knowledge of contraceptive is widely spread in every part of the country (Nigeria), men and women know at least one modern method. Women are most likely to know about the Pill, injectibles, and condoms, while men are most likely to be familiar with condoms, spermicides, and so on. Both are not ignorant of traditional ways of family planning but the potency of modern devices are scientifically proven. Sharon (1996) and International Family Planning Perspective (IFPP) (2003) see the use of contraceptives preventing the unnecessary increase in family size. Caldwell and Caldwell (1987), Van De Walle and Foster (1990) revealed that fertility decreases in Kenya amidst speculations that such a decline could be impossible, given the constellation of cultural forms and norms that provide support for high fertility, while Ascadi (1990) added that such norms are relatively impervious to social, economic, and political changes and mostly in developing nations. In fact, the populace of Ogun State is interested in both large family size and small number of family but this is influenced by educational background, financial status, occupational status, social class, sex composition preference, and so on. It is observed that some families in Ogun State have a sort of peculiarity to poor family size.

Zick and Xiang (1994) explained that the relationship between income and demand for children is not necessarily linear; and an increase in income may not necessarily lead to an increase in demand for children because individuals may choose to invest in the quality of surviving children. NDHS (2003) submits that most families based their family size on their economic status especially wealth. For instance, most opulent men, irrespective of their residence, married wives and even deviate from tamable family size because of their level of opulence. But most highly rich families have the lowest family size. Meanwhile, the lowest wealth quintile has high family mean.

The issue of ideal family size emerges as a response to conflict relationship between population growth and means of subsistence. In other words, Ideal Family Size (IFS) is seen as a way of ensuring

and maintaining a good standard of living in the societies as well as in the family. Zick & Xiang (1994) quoting Easterlin (1980) reported that increases in the price and cost for children will reduce family size which tends to increase population. Anyaele, (2002) quoting Malthus (1798), reported that increases in food will lead to increases in population while lack of food will decrease the population, NDHS (2003), also supported this. So, one can presume that agrarians believed that children are always born with their food and this usually aids their deviation from ideal family size. NDHS (2003), and NFFPHS (1991), admitted that increases in taste for children especially preference for either of the sexes will lead to increases in family size.

Ideal Family Size is better viewed as family composition i.e. the number of people that should constitute a family; this will be in terms of a father, mother, and children, Sharon (1996), Olenick (1988) viewed ideal family size (IFS) as the number of children that a family will be able to train without any form of problems. According to International Family Planning Perspective (IFPP)(2003), Ideal Family Size (IFS) is the number or size of people that should constitute a family in such a way that family resources will be enough to manage effective parenting. NDHS (2003), viewed Ideal Family Size (IFS) with respect to background characteristics which are: Residence [Urban & Rural], Region[North Central, Southwest, Northwest, South-South], Education [No Education, Primary, Secondary, Higher Education], Wealth Quintile [Lowest, Second, Middle, Forth, High].

Singapore (2005) paper and analysis statistical snippet revealed that family size is becoming smaller in the average number of children born to the ever married females, and that there was a negative correlation between family size and educational attainment of the mother. Graduate mothers had on average 1.3 – 1.4 children, while those with below secondary education had 3.3 – 3.4 children. Singapore identified two factors which contribute to the phenomenon. These are:

1. Delay child bearing of graduates
2. Termination of smaller size by graduate mother

The fertility differential between graduate mothers with those below secondary education is larger at younger age groups but narrowed with age. This shows both the delay in child bearing of graduate mothers' vis-à-vis below secondary education mothers, and the catching up time progresses. Though, there is a catch-up process by graduate mothers, the eventual family size [with reference to another aged 50 and above] below secondary mothers is still much higher than graduate mothers. This supports the McCarthy and Oni (1987) that the number of surviving children, women's education, and sex preferences significantly affect desired family size. Meanwhile, young people in Kenya revealed significant negative effect of age, education, mass media exposure, and modern orientation, on ideal family size; of these variables education and age have the strongest effect, (Musyok, 1983). Men in Nigeria want more children than women. Ideal family size among urban men is lower than that of rural men with 6.6 and 9.8 respectively. Regional difference is also high because men in the northwest versus south west revealed 12.8 & 4.8 respectively, (NDHS 2003).

Ware (1974) revealed that there is no measure that provides an equal effective index of the potential for change in family size in developing countries. Reflection of norms and culture of a place, particularly those that are related to the value of children affect decisions of people on family size, (Kent & Larson 1982).

Asides, ideal family size is basically influenced by a host of factors; (NDHS 2003, and NFFPHS 1991), spelt out these factors: age, age of marriage, parity, education, last born, region, residence, wealth, previous birth, fertility, maternal and child health, and level of awareness. Meanwhile some experts argued the factors that determine or influence fertility decision making have an influence on ideal family size: – Ascadi and Ascadi (1990) revealed that in societies where fertility is controlled by lineage, ancestors and gods' agents who do not recognize individual desire in fertility decision making, and where fertility controls are not widespread; their response to ideal family size will be altered by the variables mentioned. Leone and Giampiero (2003) also reported that overlapping, socio-economic, and physical realities affect the decisions of people on family size. Kent & Larson (1982) reported that change in circumstance also influence family size.

NFFHS (1991) perceived Fertility rate in two ways: Wanted Fertility Rate and Total Wanted Fertility Rate; (NDHS, 2003), revealed that the total wanted fertility rate is 5.3, which is 0.4 birth less than the total fertility rate of 5.7. This difference implies a low level of unwanted births in Nigeria. As stated by NDHS (2003), there is some difference between wanted fertility rate and actual fertility rate across sub groups. For example, the difference between the two rates is low in the northwest with 0.1 children and large in the south region with 0.7 children.

In fact, maternal & child health is not limited to women alone, fathers should also support the health workers, so as to achieve the best maternal and child health throughout the state. Though, during the cause of maternal & child care, issues on family planning will be emphasized and to achieve this, health facilities are needed. The status of family planning, i.e. fertility control, in Ogun State can be measured through availability of facilities that will provide this service. The number of facilities providing family planning in Ogun State is 899 facilities per 100,000 population; Status of family Planning in the State (2005), <http://www.jhunccp.org/pubs/fr/images/apprenc-43gif>.

Family well-being, which is increasingly used as a synonym for "happiness", covers both physical and psychological well-being as well as quality of relationships between parents and the quality of parent-child relationships, (Leonard and Roberts 1999). The well-being of children could be defined as having a positive dimension called "life satisfaction" (comprised of satisfaction with self, family, friends, home, and school) and a negative dimension called "psychological disturbance" (comprised of anxiety, depression, anger, disruptive behavior, and physical symptoms) (Leonard and Roberts 1999). Physical and psychological well-being of parents is shaped primarily and directly by personality characteristics, family process, and socio-economic environment.

Experts revealed that the core aspect of what makes a person feel well – in terms of their physical, psychosocial, and relational well-being are intricately bonded up with the family. Family well-being is the freedom of family from vices that can be stated further to say that family well-being is determined by the way in which conflict is handled within the family and personality traits of family members. Park (2005) submitted that poverty, unemployment, and social isolation are features of family in which children are abused. When family well-being is hampered, violence comes into such families. Generally, family violence refers to any rough and illegitimate use of physical force, aggression, or verbal abuse by one family member towards another, (Park 2005). Such abuse may be physical or psychological in nature.

Statement of the Problem

In Nigeria, many adults claimed that they are well informed about family planning devices. However literature confirms that the growth rate in Nigeria is 3.3% (NDHS, 2003), the challenges emanating from the above submission is that if adults are well informed and they practice family planning methods why should the growth rate be as high as 3.3%. Therefore, this study sets out to assess the opinion of adults on the ideal family size and its implications on family well-being.

Hypotheses

1. Religion will not significantly influence adults` opinion on the ideal family size and the family well-being.
2. Level of education will not significantly influence adults` opinion on the ideal family size and the family well-being.
3. Sex of the child will not significantly influence adults` opinion on the ideal family size and the family well-being.

Research Methods

This study is delimited to the adults in Ogun state. The instrument for this study is a self-structured questionnaire of 2 sections. Section “A” covers demographic data of the respondents while section “B” has 8 items (statements) that will be used to collect data to test the hypotheses raised for this study. In order to ensure face and content validity of the instrument, experts in Test and Measurement in the Faculty of education, Olabisi Onabanjo University, Ago – Iwoye were consulted. The reliability of the instrument was established through Test-retest method which was subjected to Pearson Product Correlation Coefficient (r) which gave a reliability of 0.92

Ogun state has a population of 3,728,098 people with four geopolitical zones: Remo, Ijebu, Yewa and Egba, (Nigeria news- Nigeria Population2006). These zones are adequately covered in this study. Two hundred respondents were randomly chosen using simple random sampling techniques. The sampling covered both the rural and urban segment of each zone. Therefore, the sample size for the study is eight hundred (800) subjects. The data obtained were collated and analyzed using inferential statistics of chi-square to test the acceptance and non-acceptance of the hypotheses.

Significance of the Study

- 1 To advocate for active involvement in the use of family planning devices
- 2 To control the growth rate
- 3 To encourage young families to make wise decisions on ideal family size and good health

Data analysis

The data obtained were analyzed using inferential statistics of chi-square.

Hypothesis 1

Religion will not significantly influence adults` opinion on the ideal family size and the family well-being.

Table 1: Chi-square analysis of Religion and adults` opinion on Ideal family size

		Responses		
		Always	Sometimes	Never
Christian	Observed	130	131	167
	Expected	128.4	128.4	171.2
Islam	Observed	59	67	93
	Expected	65.7	65.7	87.6
Others	Observed	51	42	60
	Expected	45.9	45.9	61.2

X^2 cal = 2.139, df4, $P \leq 0.05$, Critical Value = 9.49; H_0 is accepted

Hypothesis 2

Level of education will not significantly influence adults` opinion on the ideal family size and the family well-being.

Table 2: Chi-square analysis of Level of Education and adults` opinion Ideal family size

		Responses		
		Always	Sometimes	Never
No Formal Education	Observed	20	80	130
	Expected	23.0	92.0	115.0
Pry Education	Observed	10	20	60

	Expected	9.0	36.0	45.0
Sec Education	Observed	20	140	100
	Expected	26.0	104.0	130.0
Post Sec Education	Observed	30	80	110
	Expected	22.0	88.0	110.0

$X^2_{cal} = 40.541$, df_6 , $P \leq 0.05$, Critical Value = 9.49; H_0 is rejected

Hypothesis 3

Sex of child will not significantly influence adults' opinion on the ideal family size and the family well-being.

Table3: Chi-square analysis of child's sex and adults' opinion on Ideal family size

		Responses		
		Always	Sometimes	Never
Male	Observed	168	66	110
	Expected	172.0	69.2	102.8
Female	Observed	232	95	129
	Expected	228.0	91.8	136.2

$X^2_{cal} = 1.320$, df_2 , $P \leq 0.05$, Critical Value = 5.99; H_0 is accepted

Discussion of Findings

Hypothesis 1

Religion will not significantly influence adults' opinion on the ideal family size and family well-being.

Based on data collected and analyzed in Table 1 the critical value is greater than the calculated value;

therefore, the hypothesis was accepted. This study reports that religion did not significantly influence adult opinion on ideal family size and family well-being. The finding agrees with Kent and Larson (1982) that changes in circumstances influence family size as well as family well-being. Though, Leonard and Robert (1999) stated that problem-solving style promotes family well-being, and this epistle is usually preached by the major religion in the state through a series of programs for both single and married people. Marriage counseling, seminar, and family conflicts resolution exercise are the means used by the religion to foster family well-being. Bolaji and Prosper (2000) reported that religious women with high education, especially Catholics want fewer children. But the truth is that circumstances influence adults' opinion on the ideal family size and well-being.

Hypothesis 2

Level of education will not significantly influence adults' opinion on the ideal family size and family well-being.

In Table 2, the calculated chi-square of 40.541 was far greater than the critical value of 9.49 at degree of freedom 4, set at 0.05 level of significance. The hypothesis was therefore rejected. This implies that level of education significantly influences adults' opinion on the ideal family size and family well-being. NDHS (2003) reveals that men and women with higher education have less mean ideal number of children compared to men and women without education; and findings of Leonard & Robert (1999) that education indirectly influence family well being. It can be inferred from these findings that education is a strong weapon in the utilization of family planning devices.

Hypothesis 3

Parents' child's sex preference will not significantly influence adults' opinion on the ideal family size and family well-being.

Based on the data collected and analyzed, the table value of 5.99 is slightly greater than the chi-square calculated of 1.320, therefore the hypothesis was accepted. This implies that adults in Ogun state agreed that both sexes are good, that either son or daughter is good; and looking for either more sons or more daughters at the expense of either son or daughter is dangerous to the family's well-being. Meanwhile, this supports the view of Olenick (1998), NDHS (2003), & IFPP (2003) that ideal family size is the number of people that should constitute a family in such a way that the family resources will be enough to manage effective parenting; whereas effective parenting is the basis for family well-being. This supports the findings of Leonard & Roberts (1999) that family well-being is synonymous to "happiness", which covers both physical and psychological well-being as well as the quality of relationship between parents, and the quality of parent-child relationships.

Conclusion and Recommendations

This study looked into Adults' opinion on the ideal family size and family well-being in Ogun State. Three hypotheses were tested, two hypotheses were accepted, while one was rejected. This implies that religion and child's sex do not influence Ogun State Adults' opinion on ideal family size and family well-being while level of education does. Based on these findings the following are recommended:

- 1 Teaching of Family life education must continue in every home and community through qualified

personnel.

2 Government and private bodies should collaborate to provide family planning facilities in all parts of the state and encourage their utilization.

3 Family planning facilities should be made available and easily accessible to the rural dwellers.

4 Family life education must be extended to rural areas to enhance their birth control awareness.

5 Health sectors (government and private) must intensify their effort in giving relevant family planning programs to the people.

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